



PTO/SB/21 (09-04)

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number

09/823,214

Filing Date

March 30, 2001

First Named Inventor

Dunlavey, Michael Robert

Art Unit

2128

Examiner Name

Russell Warren Frejd

Attorney Docket Number

021720-001010US

ENCLOSURES (Check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> Fee Transmittal Form | <input checked="" type="checkbox"/> Drawing(s) | <input checked="" type="checkbox"/> After Allowance Communication to TC |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | Return Postcard |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) _____ | Communication to Submit Formal Drawings After Issuance of Notice of Allowance |
| | <input type="checkbox"/> Landscape Table on CD | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | Remarks | The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Kent J. Tobin		
Date	July 28, 2005	Reg. No.	39,496

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Eleanor J. Taylor	Date	July 28, 2005



I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

PATENT
Docket No.: 021720-001010US

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

On

July 28, 2005

TOWNSEND and TOWNSEND and CREW LLP

By:

Eleanor J. Taylor

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

MICHAEL R. DUNLAVEY et al.

Application No.: 09/823,214

Filed: March 30, 2001

For: INTERACTIVE GRAPHICAL
ENVIRONMENT FOR DRUG MODEL
GENERATION

Customer No.: 20350

Confirmation No.: 6076

Examiner: Warren Russell Frejd

Art Unit: 2128

COMMUNICATION TO SUBMIT
FORMAL DRAWINGS AFTER
ISSUANCE OF NOTICE OF
ALLOWANCE

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Please make the enclosed twelve (12) sheets (Figs. 1, 2A, 2B, 3, 4, 5, 6, 7A, 7B, 7C, 7D, and 8) of formal drawings of record in the above-identified patent application.

Respectfully submitted,

Kent J. Tobin
Reg. No. 39,496

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, California 94111-3834
Tel: (415) 576-0200
Fax: (415) 576-0300
KJT:ejt